



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET**CONFIRMATION NO. 6828**

Bib Data Sheet

SERIAL NUMBER 09/506,224	FILING DATE 02/17/2000 RULE	CLASS 029	GROUP ART UNIT 3729	ATTORNEY DOCKET NO. 5267-49DIV
-----------------------------	---------------------------------------	--------------	------------------------	--------------------------------------

APPLICANTS

Masashi Shiraishi, Saku-shi, JAPAN;

Izumi Nomura, Tokyo, JAPAN;

Tsutomu Aoyama, Ichikawa-shi, JAPAN; Isamu Sato, Tokyo, JAPAN;

Masanori Sakai, Nagano-ken, JAPAN;

Tsuyoshi Umehara, Saku-shi, JAPAN;

Kenichi Takano, Saku-shi, JAPAN;

Haruyuki Morita, Komori-shi, JAPAN;

**** CONTINUING DATA *******YesMD

This application is a DIV of 09/033,789 03/03/1998 PAT 6,084,746

**** FOREIGN APPLICATIONS *******YesMD

JAPAN 48641/1997 03/04/1997

JAPAN 321950/1997 11/10/1997

JAPAN 49105/1998 03/02/1998

**IF REQUIRED, FOREIGN FILING LICENSE
GRANTED****** 04/11/2000**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JAPAN	SHEETS DRAWING 13	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 10
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials			12	3

ADDRESS

Thomas Langer, Esq.
 COHEN, PONTANI, LIEBERMAN & PAVANE
 551 Fifth Avenue, Suite 1210
 New York, NY
 10176

Method of Manufacturing 2

TITLE

Magnetic head device

FILING FEE RECEIVED 1398	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit